

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/59/827

FILING DATE

02 MAY 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/		/		
3		/		/		
4		3		/		
5		1		/		
6		1		/		
7		1		/		
8		1		/		
9		1		/		
10		1		/		
11		1		/		
12		1		/		
13		1		/		
14		1		/		
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18	/		/			
19	/		/			
20		/		/		
21		/		/		
22		3		/		
23		1		2		
24		1		2		
25		1		2		
26		1		2		
27		1		2		
28		1		2		
29	/		/			
30	/		/			
31		/		/		
32		/		/		
33		3		/		
34		1		2		
35		1		2		
36		1		2		
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43		1		2		
44		1		2		
45		1		2		
46		1		2		
47		1		2		
48						
49						
50						
TOTAL IND.	6	↓	6	↓		↓
TOTAL DEP.	47	←	61	←		←
TOTAL CLAIMS	53		67			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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96						
97						
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						